FEC FORM 1

## STATEMENT OF ORGANIZATION

FORM 1	ORGANIZATION	
i Ortivi i	(See instructions)	Office use only
NAME OF COMMITTEE (in the community of the community	(Check if name Example: If typying, type over the lines	12FE4M5
FRIENDS OF T	ODD YOUNG	
ADDRESS (number and s	POST OFFICE BOX 1053	
<b>~</b>		
(Check if address is changed)	BLOOMINGTON	IN 47402 _
	CITY▲	STATE▲ ZIP CODE ▲
COMMITTEE'S E-MAI	L ADDRESS (Please provide only one e-mail address) toddyoung@toddyoungforcongress.com	
is changed)		
COMMITTEE'S WEB	PAGE ADDRESS (URL)	
(Check if address is changed)	www.toddvounaforconaress.com	
2. DATE M M M O 9	24 2010	1
4. IS THIS STATEM		
I certify that I have exami	ned this Statement and to the best of my knowledge and belief it is true, correct ar	d complete
Type or Print Name of	Treasurer Connie K Nass	
Signature of Treasurer	Electronically Filed by Connie K Nass	Date 09 / 30 / Y Y Y Y Y
NOTE: Submission of fall	se, erroneous, or incomplete information may subject the person signing this State	•
Office Use Only	For further information of Federal Election Commiss Toll Free 800-424-9530	